



Pre-Application Meeting Request Form

Pre-application meetings are not to review or submit an application package. Contact the Zoning Information Counter (888-267-8770) for assistance in completing discretionary permit applications and to schedule a submittal appointment.

Requestor's Name _____

Requestor's Firm (if applicable) _____

Requestor's Phone _____ ext. _____ Requestor's Fax _____

Mailing Address _____

Email Address _____

Is Requestor an attorney or bringing an attorney to Pre-App and planning to discuss specific legal issues? ☐ Yes ☐ No

A Deputy County Counsel must attend meetings where an outside attorney is present and plans to discuss legal issues. If you check the "Yes" box above, but change your mind and fail to notify DPLU that you will not bring an attorney, hourly County Counsel charges as indicated below for preparation and travel (generally 1-2 hours) will still be applied. If you check the "No" box, but legal issues are brought up during the meeting, those issues will not be addressed unless you wish to reschedule the meeting so that County Counsel can be present.

The lead planner (\$129.00 per hour) and student intern (\$21.00 per hour) will perform research on your pre-app request. Other representatives and charges will apply according to the boxes you check below. You must pay for both research time and time spent in the meeting for EACH representative. **BE PREPARED TO PAY A MINIMUM OF THREE HOURS FOR EACH INDIVIDUAL, including planner and student intern.**

<input type="checkbox"/>	Road Improvements, Traffic, Drainage:	DPW Project Manager	\$141.34 per hour
<input type="checkbox"/>	Wells or Septic Systems:	DEH Specialist	\$115.00 per hour
<input type="checkbox"/>	Legal Issues:	Deputy County Counsel	\$195.00 per hour

I, the undersigned, as financially responsible person for the pre-application meeting, understand that I must bring a blank check payable to "COUNTY OF SAN DIEGO" or Visa or Mastercard to the scheduled meeting because all charges are due and payable at the conclusion of the meeting. I understand that **if I arrive for a meeting without means to pay, the meeting will be rescheduled.**

Financially Responsible Person (if different from above) _____

Mailing Address _____

Phone _____ Email Address _____

Date Signature **REQUIRED**

